

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)

Serial No.  
10/581871  
Priority Date

CLAIMS

	AS FILED		AFTER AMENDMENT		AFTER INDEPENDENT			AS FILED		AFTER AMENDMENT		AFTER INDEPENDENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1				51						
2		1					52						
3			1				53						
4				2			54						
5				2			55						
6					3		56						
7				3			57						
8				3			58						
9				3			59						
10				3			60						
11	1						61						
12		1					62						
13			1				63						
14				3			64						
15				3			65						
16				3			66						
17				3			67						
18	1						68						
19		1					69						
20			1				70						
21				4			71						
22				4			72						
23							73						
24							74						
25							75						
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32							82						
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39							89						
40							90						
41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.	5												
TOTAL DEP.	30												
TOTAL CLAIMS	35												